

NEW MEXICO STATE LAND OFFICE
OFFICE OF THE STATE GEOLOGIST
SANTA FE, NEW MEXICO

MISCELLANEOUS REPORTS ON WELLS

Submit this report in duplicate to the State Geologist or proper Oil and Gas Inspector within ten days after the work specified is completed. It should be signed and sworn to before a notary public for reports on beginning drilling operations, results of shooting well, results of test of water shut-off, result of abandonment of well, and other important operations, even though the work was witnessed by the State Geologist or Oil and Gas Inspector. Reports on minor operations need not be signed and sworn to before a notary public, but such operations should be witnessed by an Oil and Gas inspector if possible.

Indicate nature of report by checking below:

REPORT ON BEGINNING DRILLING OPERATIONS	<input checked="" type="checkbox"/>	REPORT ON DEEPENING WELL	
REPORT ON RESULT OF SHOOTING WELL		REPORT ON PULLING OR OTHERWISE ALTERING CASING	
REPORT ON RESULT OF TEST OF WATER SHUT-OFF		REPORT ON REPAIRING WELL	
REPORT ON RESULT OF ABANDONMENT OF WELL			

Oil and Gas Inspector Wink, Texas Sept. 25, 1937
Place Date

Mr. Mr. Guy Shepard- State Geologist,
Santa Fe, N. Mex.

Following is a report on the work done and the results obtained under the heading noted above at the STANOLIND OIL AND GAS COMPANY State Well No. 1 in the SE 1/4 of Sec 16 Lease 24-S, T 37-E, R 37-E N. M. P. M., Mattix Oil Field, Lea County.

The dates of this work were as follows: September 24, 1937

Notice of intention to do the work was (~~submitted~~) submitted on Form SGK C-101 on September 8, 1937, and approval of the proposed plan was (~~was not~~) obtained. (Cross out incorrect words.)

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

Loffland Brothers Drilling Contractors started drilling operations on this well at 1:00 P.M., September 24, 1937.

DUPLICATE

RECEIVED
OCT 1 -

Subscribed and sworn to before me this 25th day of September, 1937.

[Signature]
Notary Public

My Commission expires June 1, 1939

Remarks:

I hereby swear or affirm that the information given above is true and correct.

Name [Signature]

Position Field Superintendent

Representing STANOLIND OIL AND GAS COMPANY

Company or Operator

Address Wink, Texas

[Signature]
Name

Oil & Gas Inspector

Title

